



Connecticut Department of  
Energy & Environmental Protection  
Bureau of Air Management  
Radiation Division

## Radioactive Material and Industrial X-Ray Device Registration

Please complete this form in accordance with the [instructions](#) (DEP-RAD-INST-100) to ensure the proper handling of your registration. Print or type unless otherwise noted. You must submit the registration fee, and all supporting documentation along with this form. Please retain a copy of this completed form at your facility.

### Part I: Registration Type

CPPU USE ONLY	
App #:	_____
Doc #:	_____
Check #:	_____
Program: Radiation	

Requested Year of Registration Period: \_\_\_\_\_

Registrations are based on the calendar year: January 1<sup>st</sup> through December 31<sup>st</sup>.

Registrant Name: \_\_\_\_\_

Check the appropriate box(es) identifying the registration type.

- ☐ new registration (i.e., never registered with the DEEP) [221]
- ☐ new ownership\* [221]
- ☐ renewal of an existing registration\* [221]
- ☐ amendment to an existing registration\* [1467]

\* Provide **Permit Number** (aka Facility ID#; see DEEP correspondence to registrant):

\_\_\_\_\_

\* *If renewing or amending an existing registration, please indicate any changes to the existing registration information by using red ink.*

Note: If you are terminating your registration, or removing a device(s) from registration, refer to the registration instructions (DEP-RAD-INST-100) for required documentation necessary to comply with DEEP requirements.

Town where site is located: \_\_\_\_\_

### Part II: Fee Information

An annual registration fee of \$200.00 is to be submitted with *each* registration and applies for the period covering the requested calendar year. The fee is not pro-rated. New registrants are required to pay the fee regardless of when they register with the DEEP. To renew a registration, please submit your registration and fee by November of the applicable year. There is **no fee** for amendments. The registration will not be processed without the fee. The fee shall be non-refundable and shall be paid by check or money order to the **Department of Energy and Environmental Protection**.

### Part III: Registrant Information

- If a registrant is a corporation, limited liability company, limited partnership, limited liability partnership, or a statutory trust, it must be registered with the Secretary of State. If applicable, registrant's name shall be stated **exactly** as it is registered with the Secretary of State. Please note, for those entities registered with the Secretary of State, the registered name will be the name used by DEEP. This information can be accessed at the Secretary of State's database (CONCORD). ([www.concord-sots.ct.gov/CONCORD/index.jsp](http://www.concord-sots.ct.gov/CONCORD/index.jsp))
- If a registrant is an individual, provide the legal name (include suffix) in the following format: First Name; Middle Initial; Last Name; Suffix (Jr, Sr., II, III, etc.).

### Part III: Registrant Information (continued)

#### 1. Registrant Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

Contact Person:

Phone:

ext.

\*E-mail:

\*By providing this e-mail address you are agreeing to receive official correspondence from the department, at this electronic address, concerning the subject registration. Please remember to check your security settings to be sure you can receive e-mails from "ct.gov" addresses. Also, please notify the department if your e-mail address changes.

- a) Registrant Type (check one): ☐ individual ☐ \*business entity ☐ federal agency  
☐ state agency ☐ municipality ☐ tribal

\*If a business entity: (\*If a business entity complete i through iii):

- i) check type: ☐ corporation ☐ limited liability company ☐ limited partnership  
☐ limited liability partnership ☐ statutory trust ☐ Other: \_\_\_\_\_

- ii) provide Secretary of the State business ID #: \_\_\_\_\_ This information can be accessed at [CONCORD](#)

- iii) ☐ Check here if you are **NOT** registered with the SOTS.

- b) Registrant's interest in property at which the proposed activity is to be located:

- ☐ site owner ☐ option holder ☐ lessee ☐ easement holder ☐ operator  
☐ other (specify): \_\_\_\_\_

- ☐ Check here if any co-registrants. If so, attach additional sheet(s) with the required information as requested above.

#### 2. List billing contact, if different than the registrant.

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

Contact Person:

Phone:

ext.

E-mail:

#### 3. List primary contact for departmental correspondence and inquiries, if different than the registrant.

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

Contact Person:

Phone:

ext.

E-mail:

\*By providing this e-mail address you are agreeing to receive official correspondence from the department, at this electronic address, concerning the subject registration. Please remember to check your security settings to be sure you can receive e-mails from "ct.gov" addresses. Also, please notify the department if your e-mail address changes.

### Part III: Registrant Information (continued)

<b>4. List the Radiation Safety Officer (RSO). <i>There must be one RSO listed per registration.</i></b> Name: Direct Phone: ext. Fax: E-Mail Address: 24-Hour Emergency Phone:
<b>List other contact people in the radiation safety section.</b> Name: Title: Direct Phone: ext. Fax: E-Mail Address: 24-Hour Emergency Phone:
Name: Title: Direct Phone: ext. Fax: E-Mail Address: 24-Hour Emergency Phone:

### Part IV: Site Information

1. Company Name: Site Name (if different): Address: City/Town: State: Zip Code: Business Phone: ext. 24-Hour Emergency Phone:
2. Location of Material (if different than above):  City/Town: State: Zip Code:

### Part V: NRC Licenses

*For new licenses, attach a copy of each license; for renewals or modifications, attach any amended pages of each license.*

NRC License #	Amendment #	Expiration Date

## Part VI: Personnel Dosimetry

1. Indicate whether personnel dosimetry is performed at your facility. ☐ Yes ☐ No
2. If yes indicate the name of vendor that provides this service:

## Part VII: Compliance

If you answer yes to any of the questions below, you must complete Part VIII: Table of Enforcement Actions as directed in the instructions for your registration.

- A. During the five years immediately preceding submission of this registration, has the registrant been convicted in any jurisdiction of a criminal violation of any environmental law?  
☐ Yes ☐ No
- B. During the five years immediately preceding submission of this registration, has a civil penalty been imposed upon the registrant in any state, including Connecticut, or federal judicial proceeding for any other violation of an environmental law?  
☐ Yes ☐ No
- C. During the five years immediately preceding submission of this registration, has a civil penalty exceeding five thousand dollars been imposed on the registrant in any state, including Connecticut, or federal administrative proceeding for any violation of an environmental law?  
☐ Yes ☐ No
- D. During the five years immediately preceding submission of this registration, has any state, including Connecticut, or federal court issued any order or entered any judgment to the registrant concerning a violation of any environmental law?  
☐ Yes ☐ No
- E. During the five years immediately preceding submission of this registration, has any state, including Connecticut, or federal administrative agency issued any order to the registrant concerning a violation of any environmental law?  
☐ Yes ☐ No

## Part VIII: Table of Enforcement Actions

Type of Action:	Type of Action:	Type of Action:
Date Commenced:	Date Commenced:	Date Commenced:
Date Terminated:	Date Terminated:	Date Terminated:
Jurisdiction:	Jurisdiction:	Jurisdiction:
Case/Docket/Order Number:	Case/Docket/Order Number:	Case/Docket/Order Number:
Description of Violation:	Description of Violation:	Description of Violation:

☐ Check the box if additional sheets are attached. Copies of this form may be duplicated for additional space.

For Parts IX through XVI, you may hit the tab button at the end of each table, in the last cell, and create additional rows.

### Part IX: Industrial X-Ray Equipment

Type	Model #	Serial #	Manufacturer	Maximum kV	Maximum mA	Maximum Exposure Time

### Part X: Analytic Equipment for Examination of Material

(Including, but not limited to, X-ray diffraction units, electron microscopes, gauging devices, spectroscopic equipment, gas chromatographs, and fluoroscopic units; do **not** include X-ray tubes used for diagnosis or therapy)

Type	Model #	Serial #	Manufacturer	Maximum kV	Maximum mA

### Part XI: Industrial Radiographic Equipment

(For examination of structure with a sealed source)

Type	Model #	Serial #	Manufacturer

### Part XII: Particle Accelerators

(Including, but not limited to, Van de Graffs, Linacs, Cyclotrons, Electronic Beam Welders)

Type	Model #	Serial #	Manufacturer	Output	Purpose

### Part XIII: Special Nuclear Material

(Special nuclear material [SNM] refers to plutonium, <sup>233</sup>U, uranium enriched in the isotope 233 or in the isotope 235 greater than its natural abundance, and any other material which the US NRC, pursuant to the provisions of Section 51 of the Atomic Energy Act of 1954, determines to be special nuclear material; SNM does **not** include source material.)

Form	Radio Nuclide	Avg Amount on Hand (Ci or g)	Total Amount Allowed

### Part XIV: Source Material

(Source material [SM] refers to uranium or thorium, or any combination thereof, in any physical or chemical form, or ores which contain at least 0.05% by weight uranium, thorium, or any combination thereof, except when the material is designated as special nuclear material.)

Form	Radio Nuclide	Avg Amount on Hand (Ci or g)	Total Amount Allowed

### Part XV: Sealed Sources

Radio Nuclide	Number of Sources	Activity Per Source (mCi)	Total Activity (mCi)	Leak Test Frequency

### Part XVI: Other Radioactive Materials (including medical isotopes)

Radio Nuclide	Chemical/Physical Form	Maximum Allowed (mCi)	Average on Hand (mCi)	Use of Each Form

## Part XVII: Waste Disposal

Does your facility generate LLRW which will require disposal by burial?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does your facility generate short half-life radioactive waste?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does your facility dispose of radioactive waste to a sanitary sewer?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Remarks or Comments:		

## Part XVIII: Registration Certification

The company executive with overall responsibility for the facility, and the individual(s) responsible for actually preparing the registration must sign this part. A registration will be considered incomplete unless all required signatures are provided.

<p>"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate, and complete to the best of my knowledge and belief.</p> <p>I certify that this registration is on complete and accurate forms as prescribed by the commissioner without alteration of the text.</p> <p>I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute."</p>	
Signature of Company Executive	Date
Name of Company Executive (print or type)	Title (if applicable)
Signature of Preparer	Date
Name of Preparer (print or type)	Title (if applicable)
<input type="checkbox"/> Check here if additional signatures are required. If so, please reproduce this sheet and attach signed copies to this sheet.	

Note: Please submit the following:

- ☐ a completed registration form;
- ☐ fee (paid by check or money order to the **Department of Energy and Environmental Protection**);
- ☐ copy of each NRC license, or amended pages of NRC licenses.
- ☐ supporting documentation as indicated in the instructions, for terminating a registration or removing a device(s) from registration.

to: CENTRAL PERMIT PROCESSING UNIT  
CT DEPARTMENT OF ENERGY AND ENVIRONMENTAL PROTECTION  
79 ELM ST  
HARTFORD, CT 06106-5127

An out of state registrant planning to make a site visit to Connecticut shall submit an additional form, the [Temporary Use Notification](#) (DEP-RAD-REG-101) at least three days prior to entering the state, informing the department of their activities within Connecticut. The *Radioactive Materials and Industrial X-Ray Devices Registration Form* must have been previously submitted before filing a *Temporary Use Notification*.